

I would like to send a gift of Zoo Parent to:

Recipient's Name: _____

Address: _____ City: _____

State: _____ Zip: _____

_____ Please send the adoption certificate directly to recipient.

_____ Please send the Zoo Parent materials to me for giving.

(for office use: Renewable one year from: _____)

Detach and mail to Zoo Parent, Washington Park Zoological Society, 115 Lakeshore Dr., Michigan City, IN 46360

Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip: _____

Name(s) that should appear on Parent sponsor certificate: _____

I would like to sponsor: _____ Amount enclosed: _____

Check Enclosed Visa/MC # _____ Exp. Date: _____

Signature: _____

If this is a gift, please fill out both sides of this form. Please make check payable to: Washington Park Zoological Society
219/873-1510